FEC FORM 1

## STATEMENT OF ORGANIZATION

FORM 1	ORGANIZ	ATION		
1 OTTIVI 1	(See instructi	ons)		Office use only
NAME OF COMMITTEE (in f	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
Fleming For C	ongress 			
ADDRESS (number and s	PO Box 1236			
(Check if address is changed)				
	Minden			71058   - 1236
		CITY	STATE	ZIP CODE 📥
COMMITTEE'S E-MAI	L ADDRESS (Please provide only one e	-mail address)		
(Check if address is changed)				
(Check if address is changed)	PAGE ADDRESS (URL)  LIIIIII			
2. DATE 0 1	/ D D / Y Y Y Y Y Y 1900			
3. FEC IDENTIFICA	TION NUMBER	C C00445015		
4. IS THIS STATEM	ENT NEW (N) OR	X AMENDED (A	<b>(</b> )	
I certify that I have examin	ned this Statement and to the best of my kn	owledge and belief it is true, corr	ect and complete	
Type or Print Name of	Treasurer Mrs. Susan Sha	w		
Signature of Treasurer	Electronically Filed by Mrs. Sus	an Shaw	Date 0 2	02 2011
NOTE: Submission of fal	se, erroneous, or incomplete information management of the ANY CHANGE IN INFORMA	ay subject the person signing this		
Office Use Only		For further informa Federal Election Co Toll Free 800-424-9	mmission	FEC FORM 1 (Revised 02/2009)